BEST AVAILABLE COPY

•								Application or Docket Number					
PATENT APPLICATION FEE DETERMINATION RECOI Effective October 1, 2000									(09/0	G	337 (
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OR	OTHER THAN OR SMALL ENTITY	
TOTAL CLAIMS								RAT	E	FEE]	RATE	FEE
FOR			NUMBER F	ILED	NUMBER EXTRA			BASIC	FEE	355.00	OR	BASIC FEE	710.00
TOTAL CHARGEABLE CLAIMS			(5) fmin	us 20=	. 45			X\$ 9)=	405	OR	X\$18=	
INDEPENDENT CLAIMS			4 mir	nus 3 =	• /			X40=		40	OR	X80=	
MU	LTIPLE DEPENI	DENT CLAIM PR	RESENT			+135				/35		√ +270=	
* If	the difference	in column 1 is	less than zero, enter "0" in column 2			i	TOTAL -		123	OR OR	TOTAL		
CLAIMS AS AMENDED - PART II										L	1	OTHER	THAN
ļ		(Column 1)	(Column 2		nn 2)	(Column 3)		SMA	LL	ENTITY	OR	SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT	-	HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RAT	E	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NOW	Total	•	Minus	**		=		X\$ 9)= -		OR	X\$18=	
AME	Independent			***		=	**	X40	=		OR	X80=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+135			OR	+270=	
		· -						TO	TAL	 		TOTAL	
	(Column 1) (Column 2) (Column 3)							ADDIT. I	FEE		10n	ADDIT. FEE	
	·	CLAIMS REMAINING		HIGH			ı			ADDI-	1		ADDI-
MENT B		AFTER AMENDMENT		PREVI		PRESENT EXTRA		RAT	E	TIONAL FEE		RATE	TIONAL FEE
N Q M	Total	*	Minus	**		=		X\$ 9)=		OR	X\$18=	
AMEND	Independent	*	Minus	***		=		X40=			OR	X80=-	t'er
الـــــــــــــــــــــــــــــــــــــ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+135		<u> </u>	1		
)= TAL		OR	+270=	
								ADDIT. I			OR	ADDIT. FEE	L
 -	(Column 1) (Column 2) (Column 3) CLAIMS HIGHEST												r . <u></u>
AMENDMENT C		REMAINING AFTER AMENDMENT		NUM PREVI	BER OUSLY FOR	PRESENT EXTRA		RAT	Ε	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NON	Total	*	Minus	**		=		X\$ 9)=		OR	X\$18=	
AME	Independent		Minus	***		=		X40	=		OR	X80=	
广	FIRST PRESE	NTATION OF M	ULTIPLE DE	PENDEN'	T CLAIM]				1		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.											OR	+270= TOTAL	
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ADDIT. FEE											OR	ADDIT. FEE	
		nber Previously Pa					er fou	und in th	e ap	propriate bo	x in co	olumn 1.	